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<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) <b>337348055US1</b>
In re Application of <b>Sheffield et al.</b>		
Application Number <b>10/731,892-Conf. #4677</b>		Filed <b>December 9, 2003</b>
For <b>METHODS FOR TREATING AND/OR COLLECTING INFORMATION REGARDING NEUROLOGICAL DISORDERS, INCLUDING LANGUAGE DISORDERS</b>		
Art Unit <b>3766</b>		Examiner <b>J. L. Reidel</b>
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.		
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) <b>\$ 510.00</b>		
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <b>\$ 255.00</b> <input checked="" type="checkbox"/> The amount of the fee is being paid via EFT Account. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <b>50-0665</b> . <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.		
<b>WARNING: INFORMATION ON THIS FORM MAY BECOME PUBLIC. CREDIT CARD INFORMATION SHOULD NOT BE INCLUDED ON THIS FORM. PROVIDE CREDIT CARD INFORMATION AND AUTHORIZATION ON PTO-2038.</b>		
I am the <input type="checkbox"/> applicant /inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <b>42,216</b> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		
 <b>John M. Wechkin</b> Typed or printed name <b>(206) 359-8000</b> Telephone number <b>November 5, 2007</b> Date		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/> *Total of <b>1</b> forms are submitted.		